

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Put Alaska First		FEC IDENTIFICATION NUMBER ▼ C C00544346	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ambrosino Muir Hansen Crounse			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2014		
Mailing Address 500 Sansome St Ste 404			Amount 44420.00		
City San Francisco	State CA	Zip Code 94111-3218	Transaction ID : VNGY99W1317		
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2014		
Name of Federal Candidate Dan Sullivan		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought 7738876.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014		
Mailing Address 3050 K St NW Ste 100			Amount 546412.00		
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VNGY99WGFK3		
Purpose of Expenditure TV Media Schedule		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2014		
Name of Federal Candidate Dan Sullivan		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK		
Calendar Year-To-Date Per Election for Office Sought 7738876.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	590832.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jim Lottsfeldt

[Electronically Filed]

Date

MM / DD / YYYY
10 / 15 / 2014

Signature